

ROUTING AND TRANSMITTAL SLIP

Date *84-200 6/4*
6 April 1984

TO: (Name, office symbol, room number, building, Agency/Post)	Initials	Date
1. <input type="text"/> Chief, Liaison Division, OLL	<input checked="" type="checkbox"/>	
2. <input type="text"/>		
3. <input type="text"/>		
4. <input type="text"/>		
5. <i>Registration</i>		
Action	File	Note and Return
Approval	For Clearance	Per Conversation
As Requested	For Correction	Prepare Reply
Circulate	For Your Information	See Me
Comment	Investigate	Signature
Coordination	Justify	

REMARKS

Jim,

Per your request, attached are the answers provided to the SSCI questions on narcotics. If you need anything else, give me a call.

Retain or destroy.

**DO NOT use this form as a RECORD of approvals, concurrences, disposals,
clearances, and similar actions**

FROM: (Name, org. symbol, Agency/Post)

Daniel A. Childs, Jr., Comptroller
SO41-102

Room No.—Bldg.
4E06 Hqs.

STAT

Daniel A. Childs, Jr., Comptroller
SO41-102

OPTIONAL FORM

Prescribed by *.....*
FPMR (41 CFR) 101-11.206

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